

**REVISED and CORRECTED**
Victim Impact StatementUnited States v. Thomas Gibson, et al.Court Docket: 3:11CR-123-RAUSA: James R. Lesousky, Jr./Marisa A. Ford**A. Initial Crime Related Loss****ASHVILLE STOCKYARD, INC.****NET FINAL LOSSES**The total amount of crime related loss..... **\$41,756.64**On a separate page, please list the individual losses or expenses. If possible, please attach any supporting documents you have such as receipts, repair bills, etc. **SEE ATTACHED EXHIBIT: Revised and Corrected Amended Proof Of Claim****B. Recovered Losses**

Please list any property or money that you have recovered or is being held by law enforcement officials:

NONE

If you received any payments or benefits as a result of the crime, please list below the amounts received and information on the company who provided the payments:

Name:			
Address:			
Phone:		Tax ID No. (EIN):	
Contact:		Claim No.:	
Amount received:		Amount of Claim:	

Amount of Recovered Losses..... **\$0.00****C. Total Crime Related Loss**..... **\$41,756.64**

I declare under penalty of law that the above information I have provided is true:

Signature: Date: **4/22/2016****W. Scott Newbern, PL**
Counsel For Ashville Stockyard, Inc.

If restitution is ordered, please provide us with an address where restitution payments should be mailed:

Name:	ASHVILLE STOCKYARD, INC.		
Address:	c/o W. Scott Newbern, PL, 2982 Giverny Circle		
City:	Tallahassee	State:	Florida
		Zip:	32309
Phone Number:	850.591.1707		
Last 4 numbers of Social Security number:	7020		

Victim Impact Statement

In addition to finances, crimes can also have an emotional impact and you and those close to you. The emotional impact of a crime has had on its victims is also important for the Court to know. The following questions are designed to help individuals who are having difficulty expressing their emotions. Feel free to answer the questions below or write up your own statement. If needed, you can attach additional pages.

1. How has this crime affected you and those close to you? Has the crime caused you to suffer any type of physical or emotional injuries?

See Attached. Fifth Third Bank dishonored Eastern Livestock Co. checks issued in payment for livestock at our Stockyard in amounts that, absent the recovery of cattle and payments as outlined here, the business would have folded. At the same time, we were pursued by the Trustee for actually following the Packer & Stockyards federal law in recovering unpaid amounts to maintain the proper balance in our "Custodial Account For Shippers Proceeds." Despite this, we still incurred a fine from the PSA..

2. Have you or members of your family received counseling or therapy as a result of the crime?

n/a

3. How has this crime affected your ability to perform daily tasks such as working, taking care of your family, going to school? How has the crime impacted events that you routinely enjoyed doing prior to the crime?

Absent recovery the business would have gone under. The Eastern matter put a strain on the entire cattle industry, but especially on the small auction markets to whom most of the dishonored checks were issued and were targeted for collecting on unpaid cattle sales as required by the Packers & Stockyards Act.

4. What would you like to see happen to the defendant(s)?

n/a

5. Is there anything else you would like the Court to know prior to sentencing the defendant?

n/a

Fill in this information to identify the case:

Debtor 1 In Re: Eastern Livestock Co., LLC

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: Southern District of Indiana

Case number 10-93904-BHL-11

Official Form 410
Proof of Claim

REVISED and CORRECTED AMENDED CLAIM
See attached Exhibit 15 and Summary

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Part 1: Identify the Claim

1. Who is the current creditor? Ashville Stockyard, Inc.
Name of the current creditor (the person or entity to be paid for this claim)
Other names the creditor used with the debtor _____

2. Has this claim been acquired from someone else?
☒ No
☐ Yes. From whom? _____

3. Where should notices and payments to the creditor be sent?
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

<p>Where should notices to the creditor be sent?</p> <p><u>W. Scott Newbern, LC</u> Name <u>2982 Giverny Circle</u> Number Street <u>Tallahassee FL 32309</u> City State ZIP Code Contact phone <u>850-591-1707</u> Contact email <u>wsnewbern@msn.com</u></p>	<p>Where should payments to the creditor be sent? (if different)</p> <p>_____ Name _____ Number Street _____ City State ZIP Code Contact phone _____ Contact email _____</p>
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Uniform claim identifier for electronic payments in chapter 13 (if you use one):

4. Does this claim amend one already filed?
☐ No
☒ Yes. Claim number on court claims registry (if known) BMC 511
Also revise and correct submission to U.S. Attorney 01/14/2016

5. Do you know if anyone else has filed a proof of claim for this claim?
☒ No
☐ Yes. Who made the earlier filing? _____

01/11/2016 Amend.
Filed on 05/06/2011
MM / DD / YYYY

Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor? ☒ No
☐ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: _____

7. How much is the claim? \$ 41,756.64 Does this amount include interest or other charges?
including \$20k to Trustee ☒ No

See Attached Claim Summary Exhibits A & 15

- ☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.
Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).
Limit disclosing information that is entitled to privacy, such as health care information.

Unpaid cattle sales adjusted for recovery, payment & settlement

9. Is all or part of the claim secured? ☒ No
☐ Yes. The claim is secured by a lien on property.

Nature of property:

- ☐ Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.
☐ Motor vehicle
☐ Other. Describe: _____

Basis for perfection: _____

Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)

Value of property: \$ _____

Amount of the claim that is secured: \$ _____

Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)

Amount necessary to cure any default as of the date of the petition: \$ _____

Annual Interest Rate (when case was filed) _____ %

- ☐ Fixed
☐ Variable

10. Is this claim based on a lease? ☒ No
☐ Yes. Amount necessary to cure any default as of the date of the petition. \$ _____

11. Is this claim subject to a right of setoff? ☒ No
☐ Yes. Identify the property: _____

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

☒ No

☐ Yes. Check one:

Amount entitled to priority

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

\$ _____

☐ Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).

\$ _____

☐ Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).

\$ _____

☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).

\$ _____

☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).

\$ _____

☐ Other. Specify subsection of 11 U.S.C. § 507(a)() that applies.

\$ _____

* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

☐ I am the creditor.

☒ I am the creditor's attorney or authorized agent.

☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 04/15/2016
MM / DD / YYYY

Signature

Print the name of the person who is completing and signing this claim:

Name W. Scott Newbern
First name Middle name Last name

Title Managing Member

Company W. Scott Newbern, PL
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 2982 Giverny Circle
Number Street

Tallahassee FL 32309

City State ZIP Code

Contact phone 850-591-1707 Email wsnewbern@msn.com

<u>Ashville Stockyard, Inc. Revised And Amended Claim Summary</u>	
Dishonored Check Nos. F 34155 and F 34156	(\$163,885.80)
Cattle & Cash Recovery	133,625.65
NET Dishonored Checks & Unpaid Cattle Sales	(\$30,260.15)
NET Total Recoveries from Bond & Settlement Collections/Payments	\$8,503.52
NET Revised & Amended Claim Excl. Trustee	(\$21,756.64)
Pending Settlement - Trustee	(20,000.00)
NET Revised & Amended Claim	(\$41,756.64)

Exhibit A

Exhibit 15

Ashville Stockyard

Chapter 11
Case # 10-93904-BHL-11
Hon. Basil H Lerch III

OMB CONTROL NO. 0580-0015

U.S. Department of Agriculture
Grain Inspection, Packers and
Stockyards Administration
Packers and Stockyards
Program

Proof of Claim Under:

1. Surety Bond, (Clause 2, 3, or 4)
 2. Trust Fund Agreement, (Clause 2, 3, or 4)
 3. Trust Agreement, (Clause 2, 3, or 4)
- Issued Under Provisions of The Packers and
Stockyards Act, 1921, as Amended and Supplemented

State of (1) Alabama

County (2) St. Clair

As the undersigned, I, (3) Ashville Stockyard Inc.

Of (4) PO Box 580 (full name of claimant)
(complete mailing address) (5) 205-594-7087 & 5151
Ashville AL 35953 (phone: home, cell)
(other contact information: fax number, email address) 205-594-5672 fax

being duly sworn, depose and state:

I make this claim to (6) Capitol Indemnity Corporation
(name of trustee or surety)

RECEIVED

MAY 10 2011

BMC GROUP

Select One:

- ☒ under the bond issued by the (7a)
Capitol Indemnity Corporation
(name of surety company)
- ☐ under the Trust Fund Agreement with security held by (7b)

(depository, if one named)
- ☐ under the Trust Agreement with letter of credit held by (7c)

(name of trustee)

on behalf of (8) Eastern Livestock Co., LLC
(full name and address of principle named in bond or trust agreement)
135 West Market St., New Albany, IN 47150

in the amount of (9) 30,260.15, due and owing for livestock purchased by

(10) Eastern Livestock Co., LLC 135 West Market St.
(full name and address of buyer) Clause 2, 3, or 4 New Albany, IN 47150

for his own account or as a market agency buying livestock on a commission basis. This

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01/30/09

Page

Eastern Livestock
00511

OMB CONTROL NO. 0580-0015

claim is based on the following described livestock which was purchased by

(11) Eastern Livestock Co., LLC
(name of buyer) Clause 2, 3, or 4

(12)

Date of Sale	Number of Head	Description of Livestock	Amount
10-25-10	155	calves	\$ 75,625. ⁶⁵
11-1-10	175	calves	88,260. ¹⁵

Attached and made a part of this claim are copies of the account of purchase and other documents covering the livestock transaction, such as copies of checks issued and unpaid for the livestock purchased by:

(13) Eastern Livestock Co., LLC
(name of buyer) Clause 2, 3, or 4

and other documents indicating the sale of the livestock in question to such purchaser

for which payment has not been made. (If full and complete documents of the transaction are not available or if these papers have become lost or destroyed, the claimant should insert a statement below of the facts:)

(14) Ed Eden gave a check for the \$75,625.65, which
the bank converted into a cashier check.
Ed Eden paid a cashier check for \$58,000,
toward the \$88,260.15

OMB CONTROL NO. 0580-0015

None of the claimed amounts has been paid, and there are no setoffs or counterclaims to the same.

I hereby authorize the Grain Inspection, Packers and Stockyards Administration, Packers and Stockyards Program to release this proof of claim form and all of the attached supporting documents to the trustee or other interested parties to facilitate the processing of my claim.

(15) Brian Plunkett
(signature and title of claimant)

(16) Subscribed and sworn to before me this 28th day of Dec, 20 10.

(17) Vina Bruce

(18) Notary Public for the State of AL

(19) Residing at De Kalb

My commission expires

(20) My Commission Expires 9-20-2014

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information is 0580-0015. The time required to complete is estimated to average 30 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection.

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Current Date: November 10, 2010
Account Number: 7480493837
Capture Date: November 10, 2010
Item Number: 22230002590618
Posted Date: November 10, 2010
Amount: 75,625.65
Record Type: Debit
RT Number: 042100272


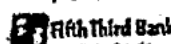
061000146
11/10/2010
6215215402

This is a copy of
your check. You can use it
the same way you would
use the original check.

RETURN REASON - S
REFER TO MAKER

0102/40/11/04/2010
202270001023207
106220401916104022901

REFER TO MAKER

 EASTERN LIVESTOCK CO., LLC	135 West Market New Albany, IN 47150 812-949-9030	2221 01	NO. F 34155 <u>Nov 3, 2010</u>
PAY to the order of <u>Ashville Stockyard, Inc.</u>		<u>\$75,625.65</u>	
<u>Seventy five thousand six hundred twenty five and 65/100</u> DOLLARS			
 Fifth Third Bank Member FDIC		Ed Edens Eastern Livestock Co., LLC	
⑆034155⑆ ⑆042100272⑆ 7480493837⑆			

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↓ Do not endorse or write below this line. ↓

Metro Bank
800 Martin Street South
Pell City, AL 35128

ASHVILLE STOCKYARD INC
CUSTODIAL ACCT - SHIPPERS PROC
PO BOX 580
ASHVILLE, AL 35953

RE: Returned items on account # 26000372

Date: 11/10/10

The items listed below, deposited to your account, have been returned for the reason indicated.

The following items will be charged to account 26000372

Check#	Amount	Drawn by	Reason
516	\$1,543.00	JUSTIN WEEMS	Insufficient funds
308	\$9,420.09	LISA WALTERS	Insufficient funds
34155	\$75,625.65	EASTERN LIVESTOCK CO	Refer to maker
34156	\$88,260.15	EASTERN LIVESTOCK	Refer to maker

We have subtracted 4 items totaling \$174,848.89 from account number 26000372.

Please subtract this amount from your records.

If you have any questions please contact us at (205)884-2265

Thank you.

Metro Bank

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United States
Department of
Agriculture

Grain Inspection,
Packers and Stockyards
Administration

210 Walnut St., Room 317
Des Moines, IA 50309-2110
(515) 323-2579 FAX (515) 323-2590

December 8, 2010

Ashville Stockyard
PO Box 580
Ashville, AL 35953

CERTIFIED MAIL NO.
91 7108 2133 3939 1446 2648
Return Receipt Requested

Dear Ashville Stockyard:

This letter is a follow-up to our previous bond claim notification letter regarding Eastern Livestock Co., LLC, (Eastern), 135 West Market St., New Albany, IN 47150. Our review of Eastern's business records disclosed that some livestock transactions were entered into on behalf of Eastern by dealers separately registered and bonded under the Packers and Stockyards Act, 1921, as amended and supplemented. You may also wish to consider filing a claim on the bond of that registered dealer.

A list of regulated entities and bond amounts can be found on the Packers and Stockyards website: www.gipsa.usda.gov. If you have any questions as to whether a buyer is registered and bonded, you may refer to the website or contact this office by telephone at (515) 323-2579.

Enclosed is a copy of a "Proof of Claim" form. In order that your claim may be handled promptly, it is suggested that you complete the Proof of Claim form and transmit the original, along with copies of supporting documents, to Grain Inspection, Packers and Stockyards Administration Midwestern Regional Office at the address shown above as soon as practical.

To properly support your claim, you should provide this office with copies of the following:

- a. Buyers' invoices or accounts of sale, showing the date of transaction, number of head and species of livestock, weight, price, etc.
- b. Insufficient funds check(s) or draft(s).
- c. Returned item from your bank, showing that checks issued in payment for livestock were returned by the bank because of insufficient funds.
- d. Any other records you have pertaining to the transaction.
- e. A full statement explaining the transaction upon which you are basing the claim.

CAUTION: The bonds of Packers and Stockyards registrants contain a provision which requires that all claims filed thereunder must be filed in writing with the trustee or Packers and Stockyards Programs. Such claims must be filed with one of the parties mentioned within 60 days from the date of the transaction on which the claim is based. Therefore, if it is your intention to file a claim, we urge you to complete the enclosed Proof of Claim form and return it to this office without delay. The Proof of Claim form should be accompanied by copies of invoices, returned checks, and any other documents, which will support the claim. Retain the Originals in your files.

**Instructions to Complete
Proof of Claim under Surety Bond
Clause Two, Three and Four
Form P&SP-2120**

When you, as a livestock seller, have not received payment for livestock sold use this form to submit a claim against the livestock buyer's bond.

Mail two copies of the completed notarized form with accompanying documentation, to the regional office of the Packers and Stockyards Program as listed below. The states covered by each regional office are listed below their address. A copy should be retained for the complainant's files.

Regional Offices of the Packers and Stockyards Program Grain Inspection, Packers and Stockyards Administration		
Eastern Regional Office Suite 230 75 Spring Street Atlanta, GA 30303-3308 Telephone: (404) 562-5840 FAX: (404) 562-5848 e-mail: PSPAtlantaGA.GIPSA@usda.gov	Western Regional Office One Gateway Centre 3950 Lewiston St., Suite 200 Aurora, CO 80011-1556 Telephone: (303) 375-4240 FAX: (303) 371-4609 e-mail: PSPDenverCO.GIPSA@usda.gov	Midwestern Regional Office Room 317 210 Walnut Street Des Moines, IA 50309-2110 Telephone: (515) 323-2579 FAX: (515) 323-2590 e-mail: PSPDesMoinesIA.GIPSA@usda.gov
States Covered	States Covered	States Covered
AL, AR, CT, DC, DE, FL, GA, LA, MA, MD, ME, MS, NC, NH, NJ, NY, PA, RI, SC, TN, VA, VT, WV	AK, AZ, CA, CO, HI, ID, KS, MT, NM, NV, OK, OR, TX, UT, WA, WY	IA, IL, IN, KY, OH, MI, MO, MN, ND, NE, SD, WI

If you have questions regarding completion of any portion of the bond claim form, please contact the Regional Office that covers the state where you reside for assistance.

In most instances, the regional office of the Packers and Stockyards Program will complete line numbers 6, 7, 8, 10, and 11. This is not a requirement, and the claimant may complete those items of the form.

The claimant(s) must complete line numbers 1, 2, 3, 4, 5, 9, 12, 13, and 14, and must sign line 15.

A NOTARY PUBLIC must complete line numbers 16, 18, 19 and 20, and sign line 17.

Line No.	Subject	Instruction
1.	State	Enter the state where you live.
2.	County	Enter the county where you live.
3.	Full Name of Claimant	Enter your full name or your firm's name, respectively, as the person(s)/firm making claim against the Principal's bond.
4.	City	Enter the city where you live.
5.	State	Enter the state where you live.
6.	Name of Trustee (if applicable)	If a trustee has been named on the referenced bond, enter that name as listed on the bond on file with the Packers and Stockyards Program. If a trustee is not required on the bond, enter "None Named", or leave this item blank. If you do not know the name of the trustee, or whether a trustee is required for the referenced bond, contact the regional office of the Packers and Stockyards Program that covers your state.



061000146
11/10/2010
6215215402

This is a LEGAL COPY of
your check. You can use it
the same way you would
use the original check.

RETURN REASON - S
REFER TO MAKER

REFER TO MAKER

022270001023561
11/04/2010

 EASTERN LIVESTOCK CO., LLC	135 West Market New Albany, IN 47150 812-949-9035	NO. F 34156 Nov 3, 2010
	PAY to the order of <u>Ashtville Stockyard, Inc</u> \$88,260 ¹⁵ <u>Eighty eight thousand two hundred sixty + 15/100</u> DOLLARS	
 Fifth Third Bank Northern Kentucky	Ed Edens III Eastern Livestock Co., LLC	
#034156# ⑆042100272⑆ 7480493837⑆		

#034156# ⑆042100272⑆ 7480493837⑆ ⑆00088260⑆



061000146
11/10/2010
6215215401

This is a LEGAL COPY of
your check. You can use it
the same way you would
use the original check.

RETURN REASON - S
REFER TO MAKER

REFER TO MAKER

022270001023207
11/04/2010

 EASTERN LIVESTOCK CO., LLC	135 West Market New Albany, IN 47150 812-949-9035	NO. F 34155 Nov 3, 2010
	PAY to the order of <u>Ashtville Stockyard, Inc</u> \$75,625 ⁶⁵ <u>Seventy five thousand six hundred twenty five + 65/100</u> DOLLARS	
 Fifth Third Bank Northern Kentucky	Ed Edens III Eastern Livestock Co., LLC	
#034155# ⑆042100272⑆ 7480493837⑆		

#034155# ⑆042100272⑆ 7480493837⑆ ⑆00075625⑆

Current Date: June 14, 2012
Account Number: 160011959386
Capture Date: November 10, 2010
Item Number: 22270001029997
Posted Date: November 10, 2010
Posted Item Number: 7858
Amount: 58,000.00
Record Type: Foreign Item (Not On Us)
RT Number: 061103056

THIS DOCUMENT HAS AN ANTI-FORGE WATERMARK PRINTED ON THE BACK. THE FRONT OF THE CHECK MUST HAVE A MICR LINE, A SIGNATURE LINE, AND AN ABSOLUTE OF THESE FEATURES WILL INDICATE A COPY.

OFFICIAL CHECK

01380320

ISSUED BY: MONEYGRAM PAYMENT SYSTEMS, INC.
P.O. BOX 9478, MINNEAPOLIS, MN 55480
DRAWEE: WACHOVIA BANK, N.A., BUFORD, GA 30505-0111

DATE
NOVEMBER 10, 2010

BancorpSouth

PAY
*****58000DOLSOCTS \$58,000.00

TO THE ORDER OF
ASHVILLE STOCKYARD INC

NAME OF REMITTER
ED EDENS

ADDRESS
ED EDENS

DRAWER: BANCORPSOUTH
00610
BY: *[Signature]*
AUTHORIZED SIGNATURE

⑈01380320⑈ ⑆061103056⑆ ⑆160011959386⑈

DO NOT WRITE / SIGN / STAMP BELOW THIS LINE

DEPOSITARY BANK ENDORSE HERE

ENDORSE CHECK HERE

[Signature]
[Signature]

ASHVILLE STOCKYARD, INC
 PO BOX 580 PHONE (205) 594-5151
 ASHVILLE, AL 35953-

Invoice # 78150
 10/25/2010 20:43:23

EASTERN LIVESTOCK LLC FAX
 135WEST MARKET
 NEW ALBANY, IN 47150-3561

SCOTT AARON
 9705 TRAMMELL RD
 DORA, AL 35062-

*** RECAP *** SUMMARY ***

Charge Account	Number Head	Total Weight	Total Amount	Avg Weight	Avg Price	Avg Amount
E 5X	7	3875	3415.60	554	88.14	487.94
E 6	2	1295	1201.25	648	92.76	600.63
E 6X	4	2570	2144.15	643	83.43	536.04
E 7X	6	4360	3415.70	727	78.34	569.28
E 51	13	6725	6646.10	517	98.83	511.24
E 55X	12	6595	5411.90	550	82.06	450.99
E 59	7	4230	3912.45	604	92.49	558.92
E 61	1	870	609.00	870	70.00	609.00
E 65	7	4800	4049.15	686	84.36	578.45
E 71	1	920	625.60	920	68.00	625.60
E 101	4	835	1304.70	209	156.25	326.18
E 225	1	235	329.00	235	140.00	329.00
E 275	1	270	378.00	270	140.00	378.00
E 300	2	645	861.45	323	133.56	430.73
E 350	2	760	893.25	380	117.53	446.63
E 375X	6	2280	2385.90	380	104.64	397.65
E 395	18	7305	8797.95	406	120.44	488.77
E 400	4	1675	1938.50	419	115.73	484.63
E 401	2	890	1032.40	445	116.00	516.20
E 401X	19	7875	7703.30	414	97.82	405.44
E 402	3	1200	1264.30	400	105.36	421.43
E 450X	11	5065	4692.65	460	92.65	426.60
E 451	8	3700	4075.75	463	110.16	509.47
E 501	12	6250	6385.70	521	102.17	532.14
E 700	1	715	693.55	715	97.00	693.55
E 800	1	870	774.30	870	89.00	774.30
	155	76810	74941.60			

Trucking: SCOTT AARON

Commission: Paid to Agent 1

Per CWT 0.50 76810 lbs. 384.05

Total Head 155

Total Weight 76810

Purchases 74,941.60

Continued on next page...

(Barn Copy)

ASHVILLE STOCKYARD, INC.

PO BOX 580 PHONE (205) 594-5151

ASHVILLE, AL 35953-

Invoice # 78151

10/25/2010 20:43:30

EASTERN LIVESTOCK LLC FAX

135WEST MARKET

NEW ALBANY, IN 47150-3561

SCOTT AARON

9705 TRAMMELL RD

DORA, AL 35062-

*** RECAP *** SUMMARY ***

Item	Number	Total	Total	Avg	Avg	Avg
Weight	Lead	Weight	Amount	Weight	Price	Amount

Total Trucking 300.00

Total Commission 384.05

Total Bill 75,625.65 Charged (Due Buyer)

NEXT HOLIDAY: THANKSGIVING CHRISTMAS & NEW YEAR.

WE APPRECIATE YOUR BUSINESS. GOAT SALE STARTS 11:30 CATTLE 12:30 EVERY MONDAY

I ATTEST THAT ALL LIVESTOCK REFERENCED BY THIS DOCUMENT AND TRANSFERRED ARE OF USA ORIGIN

Brad Plunkett

(Barn Copy)

ASHVILLE STOCKYARD, INC.

PO BOX 580 PHONE (205) 594-5151

ASHVILLE, AL 35953-

Invoice # 78823

11/01/2010 21:20:56

EASTMAN STOCK LLC FAX

12055945672

NEW ALBANY IN 47150-3561

SCOTT AARON

9705 TRAMMELL RD

DORA, AL 35062-

*** RECAP *** SUMMARY ***

Number Head	Total Weight	Total Amount	Avg Weight	Avg Price	Avg Amount
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NEXT HOLIDAY: THANKSGIVING CHRISTMAS & NEW YEAR.

APPRECIATE YOUR BUSINESS. GOAT SALE STARTS 11:30 CATTLE 12:30 EVERY MONDAY

ATTEST THAT ALL LIVESTOCK REFERENCED BY THIS DOCUMENT AND TRANSFERRED ARE OF USA ORIGIN

Brad Plunkett

(Barn Copy)

SALE EVERY MONDAY 12:30 PM
ASHVILLE STOCKYARD, INC.

PO BOX 580 PHONE (205) 594-5151

ASHVILLE, AL 35953-

Invoice # 78822
 11/01/2010 21:20:51

EASTERN LIVESTOCK LLC FAX
 135 WEST MARKET
 NEW ALBANY, IN 47150-3561

SCOTT AARON
 9705 TRAMMELL RD
 DORA, AL 35062-

*** RECAP *** SUMMARY ***

Charge Account	Number Head	Total Weight	Total Amount	Avg Weight	Avg Price	Avg Amount
E 5X	4	2165	1854.15	541	85.64	463.54
E 6X	5	3205	2603.50	641	81.23	520.70
E 7X	6	4640	3630.30	773	78.24	605.05
E 9	2	1960	1460.20	980	74.50	730.10
E 10X	5	1120	1176.00	224	105.00	235.20
E 55X	1	540	426.60	540	79.00	426.60
E 59	16	9715	8846.70	607	91.06	552.92
E 61	2	1550	1231.75	775	79.47	615.88
E 65	8	5365	4483.75	671	83.57	560.47
E 71	5	5135	3447.60	1027	67.14	689.52
E 275	2	580	833.20	290	143.66	416.60
E 300	11	3550	4549.60	323	128.16	413.60
E 350	4	1435	1780.00	359	124.04	445.00
E 395	19	7785	9551.80	410	122.69	502.73
E 400	2	845	925.95	423	109.58	462.98
E 402	2	835	847.30	418	101.47	423.65
E 450X	35	16365	14282.05	468	87.27	408.06
E 451	5	2360	2637.40	472	111.75	527.48
E 495	17	8505	8623.65	500	101.40	507.27
E 501	12	6460	6402.75	538	99.11	533.56
E 700	11	8135	7313.00	740	89.90	664.82
E 800	1	870	687.30	870	79.00	687.30
175		93120	87594.55			

Trucking: SCOTT AARON

Commission: Paid to Agent 1

Per CWT 0.50 93120 lbs. 200.00

200.00

465.60

Total Head	175
Total Weight	93120
Purchases	87,594.55
Total Trucking	200.00
Total Commission	465.60

Total Bill

88,260.15 Charged (Due Buyer)

Continued on next page...

(Barn Copy)

ASHVILLE STOCKYARD, INC

PO BOX 580 PHONE (205) 594-5151

ASHVILLE, AL 35953-

Invoice # 79527

10/25/2010 23:25:21

EASTERN LIVESTOCK LLC FAX
135WEST MARKET
NEW ALBANY, IN 47150-3561

SCOTT AARON
9705 TRAMMELL RD
DORA, AL 35062-

*** DECAD *** SUMMARY ***

Large count	Number Head	Total Weight	Total Amount	Avg Weight	Avg Price	Avg Amount
5X	7	3875	3415.60	554	88.14	487.94
6	2	1295	1201.25	648	92.76	600.63
6X	4	2570	2144.15	643	83.43	536.04
7X	6	4360	3415.70	727	78.34	569.28
51	13	6725	6646.10	517	98.83	511.24
55X	12	6595	5411.90	550	82.06	450.99
59	7	4230	3912.45	604	92.49	558.92
61	1	870	609.00	870	70.00	609.00
65	7	4800	4049.15	686	84.36	578.45
71	1	920	625.60	920	68.00	625.60
101	4	835	1304.70	209	156.25	326.18
225	1	235	329.00	235	140.00	329.00
275	1	270	378.00	270	140.00	378.00
300	2	645	861.45	323	133.56	430.73
350	2	760	893.25	380	117.53	446.63
375X	6	2280	2385.90	380	104.64	397.65
395	18	7305	8797.95	406	120.44	488.77
400	4	1675	1938.50	419	115.73	484.63
401	2	890	1032.40	445	116.00	516.20
401X	19	7875	7703.30	414	97.82	405.44
402	3	1200	1264.30	400	105.36	421.43
450X	11	5065	4692.65	460	92.65	426.60
451	8	3700	4075.75	463	110.16	509.47
501	12	6250	6385.70	521	102.17	532.14
700	1	715	693.55	715	97.00	693.55
800	1	870	774.30	870	89.00	774.30

155 76810 74941.60

uckling: SCOTT AARON 300.00
ommission: Paid to Agent 1 Per CWT 0.50 76810 lbs. 384.05

Total Head 155
Total Weight 76810
Purchases 74,941.60

Continued on next page...

(Barn Copy)

SALE EVERY MONDAY 12:30 PM

Invoice # 78528
10/25/2010 23:25:23
SCOTT AARON
9705 TRAMMELL RD
DORA, AL 35062-

Large Count	Number Head	Total Weight	Total Amount	Avg Weight	Avg Price	Avg Amount
----------------	----------------	-----------------	-----------------	---------------	--------------	---------------

Total Bill	75,625.65	Charged (Due Buyer)
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I ATTEST THAT ALL LIVESTOCK REFERENCED BY THIS DOCUMENT AND TRANSFERRED ARE OF USA ORIGIN

Brad Plunkett

(Barn Copy)

EASTERN LIVESTOCK Purchase Invoice

DATE 10/26/10

PURCHASED FROM:

Ashville Stockyard

Ashville, GA

Grade# _____

HEAD	WT.	AVG. WT.	AVG. COST	AMOUNT
155	76810			75625 ⁶⁵
ed4tru tp		540 ⁰⁰		
MCNERR TP		558 ⁰⁰		
ed4tru tp		(300 ⁰⁰)		
Easliv 07 AC		76810		
Eme int YP		155 ⁰⁰		
Ede int IP		155 ⁰⁰		
E4com CP		384.05		
BRANCH <u>24</u>				
OPERATOR _____				
VOUCHER DATE _____				
POSTED DATE _____				
G/L ACCT # _____				
VENDOR CODE _____				
QUANTITY & MATH CHECK _____				
APPROVED FOR PAYMENT _____				

Ashville to 180 X 310
OK

Trucking _____
 Commission _____
 Transit _____
 Weigh _____
 Charges _____
 Vet. _____
 Feed _____
 Other _____

TOTAL _____

135 West Market
New Albany, IN 47150



DATE Oct 26, 2010

SELLER Ashville Stockyard, Inc.

ADDRESS Ashville, AL

BUYER Ed Edens IV

NO. HD.	DESCRIPTION	WEIGHT	SHRINK	NET WT.	AV. WT.	PRICE	AMOUNT
155				76810			75625 ⁶⁵

LESS PART PAYMENT	
BEEF CHECKOFF	
EARNST MONEY	
TOTAL DEDUCTIONS	
NET PROCEEDS	75625 ⁶⁵



135 West Market
New Albany, IN 47150
812-949-9035

73-21
421

NO. F 34067

Oct 26, 2010

PAY to the order of Ashville Stockyard, Inc.

\$ 75,625⁶⁵

Seventy-five thousand six hundred twenty five + 65/100 DOLLARS



Eastern Livestock Co., LLC

Ed Edens IV

ASHVILLE STOCKYARD, INC

PO BOX 580 PHONE (205) 594-5151
ASHVILLE, AL 35953-

Invoice # 78847
11/01/2010 21:21:07

EASTERN LIVESTOCK LLC FAX
135 WEST MARKET
NEW ALBANY, IN 47150-3561

SCOTT AARON
9705 TRAMMELL RD
DORA, AL 35062-

*** RECAP *** SUMMARY ***

Charge Account	Number Head	Total Weight	Total Amount	Avg Weight	Avg Price	Avg Amount
5X	4	2165	1854.15	541	85.64	463.54
6X	5	3205	2603.50	641	81.23	520.70
7X	6	4640	3630.30	773	78.24	605.05
9	2	1960	1460.20	980	74.50	730.10
10X	5	1120	1176.00	224	105.00	235.20
55X	1	540	426.60	540	79.00	426.60
59	16	9715	8846.70	607	91.06	552.92
61	2	1550	1231.75	775	79.47	615.88
65	8	5365	4483.75	671	83.57	560.47
71	5	5135	3447.60	1027	67.14	689.52
275	2	580	833.20	290	143.66	416.60
300	11	3550	4549.60	323	128.16	413.60
350	4	1435	1780.00	359	124.04	445.00
395	19	7785	9551.80	410	122.69	502.73
400	2	845	925.95	423	109.58	462.98
402	2	835	847.30	418	101.47	423.65
450X	35	16365	14282.05	468	87.27	408.06
451	5	2360	2637.40	472	111.75	527.48
495	17	8505	8623.65	500	101.40	507.27
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700	11	8135	7313.00	740	89.90	664.82
800	1	870	687.30	870	79.00	687.30
175		93120	87594.55			

Trucking: SCOTT AARON 200.00
Commission: Paid to Agent 1 Per CWT 0.50 93120 lbs. 465.60

Total Head	175
Total Weight	93120
Purchases	87,594.55
Total Trucking	200.00
Total Commission	465.60

Total Bill 88,260.15 Charged (Due Buyer)

Continued on next page...

(Customer Copy)

DATE 11-2-10

BASED FROM: Ashville Stockyards, Inc

Grade#

Ed4 tru	tp	(200 ⁰⁰)		
abcafa4	tp	540 ⁰⁰	} 180x3 ⁰⁰	Ashville
McMeer	tp	558 ⁰⁰		180x3 ¹⁰

III Lanex Mtr tp/278.44

Trucking	
Commission	
Transit	
Weigh	
Charges	
Vet.	
Feed	
Other	
TOTAL	

114075
Quay to shore

TOTAL

0034138 10421002721 7480493837

DATE ³⁰Nov 3, 2010SELLER Ashville Stockyard, Inc
ADDRESS Ashville, AL

BUYER _____

NO. HD.	DESCRIPTION	WEIGHT	SHRINK	NET WT.	AV. WT.	PRICE	AMOUNT
	Replacing F34138						8826015
	Sale Nov 1, 2010						

LESS PART PAYMENT	
BEEF CHECKOFF	
EARNEST MONEY	
TOTAL DEDUCTIONS	
NET PROCEEDS	8876015

cashier's check

11/10 pd \$58,000.00

Ashville Stockyard